

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund		FEC IDENTIFICATION NUMBER ▼ C C00488742	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee 720 Strategies LLC		Date MM / DD / YYYY 06 / 19 / 2012	
Mailing Address 1111 19th St NW		Amount 5800.00	
City Washington	State DC	Zip Code 20036	Transaction ID : E6C99CFE6E5AE410498F
Purpose of Expenditure Website Infrastructure Costs		Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 19
Name of Federal Candidate Supported or Opposed by Expenditure: Gary Aubuchon		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33481.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Cicero Media		Date MM / DD / YYYY 06 / 19 / 2012	
Mailing Address 1625 Eye Street NW		Amount 23981.00	
City Washington	State DC	Zip Code 20006	Transaction ID : E28E24E0A4C58495B974
Purpose of Expenditure Online Video Production Costs		Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 19
Name of Federal Candidate Supported or Opposed by Expenditure: Gary Aubuchon		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 33481.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	29781.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

William Armstrong

Signature

[Electronically Filed]

Date

MM / DD / YYYY
06 / 21 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 2 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

National Association of Realtors Congressional Fund

FEC IDENTIFICATION NUMBER ▼

C

C00488742

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

National Association of REALTORS

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 430 N. Michigan Avenue

Amount

City

Chicago

State

IL

Zip Code

60611-4087

200.00

Transaction ID : EBC1339B8964744EFA8D

Purpose of Expenditure
Consulting ServicesCategory/
Type

Office Sought:

☒ House

State: FL

☐ Senate

District: 19

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Gary Aubuchon

Calendar Year-To-Date Per Election
for Office Sought

33481.00

Disbursement For: ☒ Primary☐ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

720 Strategies LLC

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 1111 19th St NW

Amount

City

Washington

State

DC

Zip Code

20036

3500.00

Transaction ID : ED6B4BDC2A81849FF9E1

Purpose of Expenditure
Website Design CostsCategory/
Type

Office Sought:

☒ House

State: FL

☐ Senate

District: 19

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Gary Aubuchon

Calendar Year-To-Date Per Election
for Office Sought

33481.00

Disbursement For: ☒ Primary☐ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

3700.00

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

33481.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

William Armstrong

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

Signature